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CONFIRMATION NO. 4578

SERIAL NUMBER 10/015,455	FILING DATE 12/13/2001  RULE	CLASS 601	GROUP ART UNIT 3764	ATTORNEY DOCKET NO. E059 1010
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## APPLICANTS

Michelle R. Eaves, Atlanta, GA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/255,219 12/13/2000

*MD*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*none*  
*MD*IF REQUIRED, FOREIGN FILING LICENSE  
GRANTED

\*\* SMALL ENTITY \*\*

\*\* 01/23/2002

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>MD</i>	STATE OR COUNTRY GA	SHEETS DRAWING 8	TOTAL CLAIMS 16	INDEPENDENT CLAIMS 2
Examiner's Signature		Initials			

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## TITLE

MOTION THERAPY DEVICE

FILING FEE  RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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